

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

10/588795

08/09/2006.

CLAIMS

	AS FILED		AFTER		AFTER		
	IND.	DEP.	1 <sup>ST</sup> AMENDMENT	IND.	DEP.	IND.	DEP.
1	1		1				
2		1		1			
3		2		1			
4		0		1			
5		0		1			
6		0		1			
7		0		1			
8		0		1			
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15		0		1			
16		0		1			
17		0		1			
18		0		1			
19		0		1			
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21	1		1				
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50							
TOTAL IND.			2				
TOTAL DEP.			19				
TOTAL CLAIMS			21				

	AS FILED		AFTER		AFTER		
	IND.	DEP.	1 <sup>ST</sup> AMENDMENT	IND.	DEP.	IND.	DEP.
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